

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval # HCL-12-023

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): **Bowling Green Wastewater Treatment Plant**

Street Address: **1189 Preston Ave**

City: **Bowling Green**

County: **Warren**

State: **Kentucky**

Contact Name: **Tim Fisher 270-782-4389**

Fax # **270-782-4583**

Description of Waste: **Sludge**

Date Shipped:

Quantity Shipped:

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: 

Date:

2-10-15

Transporter (No. 1): **Scott Waste Service**

Street Address: **1212 Eastland St
Bowling Green, Ky, 42101**

Contact Name: **Pete Reckard**

Phone No: **270-783-4016**

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature:

Date:

Other Handlers (Transfer Facility): **Apex Transfer Station**

Street Address: **55 Pleasant View Drive
Auburn, Ky, 42206**

Contact Name: **Jarrod Spencer**

Phone No: **270-901-2193**

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received:

Quantity Shipped:

Facility Signature:

Date:

Transporter (No. 2): **Clay Trucking**

Street Address: **3326 Mearl Travis Hwy
Beechmont, Ky, 42323**

Contact Name: **CLAY JONES**

Phone No: **270-543-7901**

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature:

Date:

Disposal Facility: **Hopkins County Regional Landfill**

Street Address: **380 Grays Branch Rd.
White Plains, KY 42464**

Contact Name: **Jenny Creekmur**

Phone No: **(270) 676-1919**

Description of Waste: **Sludge**

Date Received:

Quantity Received:

Facility Signature: 

Date:

**33.50 ton
2/10/15**

White - Office • Canary - Disposal Facility • Pink Generator

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval # HCL-12-023

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): **Bowling Green Wastewater Treatment Plant**

Street Address: **1189 Preston Ave**

City: **Bowling Green**

County: **Warren**

State: **Kentucky**

Contact Name: **Tim Fisher 270-782-4389**

Fax # **270-782-4583**

Description of Waste: **Sludge**

Date Shipped: **2-11-15**

Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: _____

Date: **2-11-15**

Transporter (No. 1): **Scott Waste Service**

Street Address: **1212 Eastland St
Bowling Green, Ky, 42101**

Contact Name: **Pete Reckard**

Phone No: **270-783-4016**

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____

Date: _____

Other Handlers (Transfer Facility): **Apex Transfer Station**

Street Address: **55 Pleasant View Drive
Auburn, Ky, 42206**

Contact Name: **Jarrod Spencer**

Phone No: **270-901-2193**

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____

Quantity Shipped: _____

Facility Signature: _____

Date: _____

Transporter (No. 2): **Clay Trucking**

Street Address: **3326 Mearl Travis Hwy
Beechmont, Ky, 42323**

Contact Name: **CLAY JONES**

Phone No: **270-543-7901**

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____

Date: _____

Disposal Facility: **Hopkins County Regional Landfill**

Street Address: **380 Grays Branch Rd.
White Plains, KY 42464**

Contact Name: **Jenny Creekmur**

Phone No: **(270) 676-1919**

Description of Waste: **Sludge**

Date Received: _____

Quantity Received: _____

Facility Signature: _____

Date: **2/11/15**

White - Office

Canary - Disposal Facility

Pink Generator

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval # HCL-12-023

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green Wastewater Treatment Plant Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: Kentucky
Contact Name: Tim Fisher 270-782-4389 Fax # 270-782-4583
Description of Waste: Sludge
Date Shipped: 2-12-15 Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 2-12-15

Transporter (No. 1): Scott Waste Service Street Address: 1212 Eastland St
Contact Name: Pete Reckard Phone No: 270-783-4016
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): Apex Transfer Station Street Address: 55 Pleasant View Drive
Contact Name: Jarrod Spencer Phone No: 270-901-2193
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): Clay Trucking Street Address: 3326 Mearl Travis Hwy
Contact Name: CLAY JONES Phone No: 270-543-7901
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: Hopkins County Regional Landfill Street Address: 380 Grays Branch Rd.
Contact Name: Jenny Creekmur Phone No: (270) 676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.00 ton
Facility Signature: [Signature] Date: 2/12/15
White - Office • Canary - Disposal Facility • Pink Generator

2-59

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave

City: Bowling Green County: Warren State: KY 42102

Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature] Date: 9-15-15

Transporter (No. 1): Clays Trucking Street Address: 1212 Eastland Rd Beechmont KY
Scott Waste Services Bowling Green, KY 42102

Contact Name: Pete Rickard Phone No: 270-782-4346

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: [Signature] Date: _____

Other Handlers (Transfer Facility): Apex Transfer Station Street Address: 55 Pleasant View Dr Auburn, KY 42206

Contact Name: Beth Barton Phone No: 270-901-2185

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road White Plains Ky 42464

Contact Name: Kendra Littlepage Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____ Quantity Received: 32.75 ton

Facility Signature: [Signature] Date: 9/15/15

3-24

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: 9-16-15 Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: _____ Date: _____

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 3048 ton
Facility Signature: [Signature] Date: 9/16/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP

Street Address: 1189 Preston Ave

City: Bowling Green

County: Warren

State: KY 42102

Contact Name: Heather Stringfield

Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____

Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: Tom Ke

Date: 9-22-15

Transporter (No. 1): Clay's Trucking

Street Address: Beechmont, KY

Contact Name: Rolande

Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____

Date: _____

Other Handlers (Transfer Facility): _____

Street Address: _____

Contact Name: _____

Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____

Quantity Shipped: _____

Facility Signature: _____

Date: _____

Transporter (No. 2): _____

Street Address: _____

Contact Name: _____

Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____

Date: _____

Disposal Facility: HCRL

Street Address: 380 Grays Branch Road
White Plains Ky 42464

Contact Name: Kendra Littlepage

Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____

Quantity Received: 27.67 ton

Facility Signature: K Littlepage

Date: 9/22/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave

City: Bowling Green County: Warren State: KY 42102

Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature] Date: 9-22-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY

Contact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road

Contact Name: Kendra Littlepage Phone No: 270-676-1910

Description of Waste: Sludge

Date Received: _____ Quantity Received: 30.23 ton

Facility Signature: [Signature] Date: 9/22/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 9-22-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 29.79 ton
Facility Signature: [Signature] Date: 9-22-15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 9-23-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 32.63 ton
Facility Signature: [Signature] Date: 9/23/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 9-23-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 31.609 ton
Facility Signature: [Signature] Date: 9/23/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: 9-23-15 Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 9-23-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 29.71 ton
Facility Signature: [Signature] Date: 9/23/15

155100

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 9-24-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 32.39 ton
Facility Signature: [Signature] Date: 9/24/15

155061

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: 9-24-15 Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 9-24-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.28 ton
Facility Signature: [Signature] Date: 9/24/15

152107

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1180 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: Chad Oliver Date: 9-25-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 30.38 ton
Facility Signature: Kendra Littlepage Date: 9/25/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 9-28-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 31.36 ton
Facility Signature: [Signature] Date: 9/28/15

155141

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 9-28-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 28.80 ton
Facility Signature: [Signature] Date: 9/28/15

HOPKINS COUNTY REGIONAL LANDFILL


380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

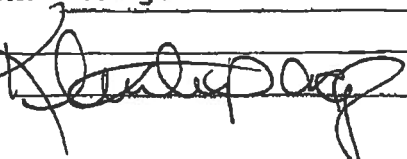
PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature:  Date: 9-29-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 24.64 ton
Facility Signature:  Date: 9/29/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 9-29-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 3330 ton
Facility Signature: [Signature] Date: 9/29/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**Source (Generator): Bowling Green WWTP Street Address: 1189 Preston AveCity: Bowling Green County: Warren State: KY 42102Contact Name: Heather Stringfield Phone No.: 270-782-4389Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature:  Date: 9-29-15Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KYContact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature:  Date: 9-29-15

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch RoadContact Name: Kendra Littlepage Phone No: 270-676-1919Description of Waste: SludgeDate Received: _____ Quantity Received: 33.65 tonFacility Signature:  Date: 9/29/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 9-30-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 26.52 ton
Facility Signature: [Signature] Date: 9/30/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 9-30-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 26.74 ton
Facility Signature: [Signature] Date: 9/30/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: 10-6-15 Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 10-6-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 32.95 ton
Facility Signature: [Signature] Date: 10/6/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: 10-6-15 Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 10-6-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: 10-6-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.20 ton
Facility Signature: [Signature] Date: 10/6/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave

City: Bowling Green County: Warren State: KY 42102

Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: 10-6-15 Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature] Date: 10-6-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY

Contact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road

Contact Name: Kendra Littlepage Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____ Quantity Received: 35.04 ton

Facility Signature: [Signature] Date: 10/6/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature] Date: 10-7-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: [Signature] Date: 10-7-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____ Quantity Received: 36.36 ton

Facility Signature: [Signature] Date: 10/7/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave

City: Bowling Green County: Warren State: KY 42102

Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature] Date: 10-7-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY

Contact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road

Contact Name: Kendra Littlepage Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____ Quantity Received: 33.54 ton

Facility Signature: [Signature] Date: 10/7/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 10-7-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 32.87 ton
Facility Signature: [Signature] Date: 10/7/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE

(270) 676-1919

FAX

(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave

City: Bowling Green County: Warren State: KY 42102

Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: *Tom Rine* Date: 10/8/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY

Contact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road

Contact Name: Kendra Littlepage Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____ Quantity Received: 35.76 ton

Facility Signature: *Kendra Littlepage* Date: 10/8/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave

City: Bowling Green County: Warren State: KY 42102

Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: *Tru Ki* Date: 10/8/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY

Contact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road

Contact Name: Kendra Littlepage Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____ Quantity Received: 35.21 ton

Facility Signature: *K Littlepage* Date: 10/8/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE

(270) 676-1919

FAX

(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave

City: Bowling Green County: Warren State: KY 42102

Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature] Date: 10/9/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY

Contact Name: Rolande Phone No.: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road

Contact Name: Kendra Littlepage Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____ Quantity Received: 36.23 ton

Facility Signature: [Signature] Date: 10/9/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave

City: Bowling Green County: Warren State: KY 42102

Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature] Date: 10/13/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY

Contact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road

Contact Name: Kendra Littlepage Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____ Quantity Received: 35.00 ton

Facility Signature: [Signature] Date: 10/13/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE

(270) 676-1919

FAX

(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP

Street Address: 1189 Preston Ave

City: Bowling Green

County: Warren

State: KY 42102

Contact Name: Heather Stringfield

Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____

Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature]

Date: ~~10/13/15~~ 10/13/15

Transporter (No. 1): Clay's Trucking

Street Address: Beechmont, KY

Contact Name: Rolande

Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: [Signature]

Date: 10-13-15

Other Handlers (Transfer Facility): _____

Street Address: _____

Contact Name: _____

Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____

Quantity Shipped: _____

Facility Signature: _____

Date: _____

Transporter (No. 2): _____

Street Address: _____

Contact Name: _____

Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____

Date: _____

Disposal Facility: HCRL

Street Address: 380 Grays Branch Road
White Plains Ky 42464

Contact Name: Kendra Littlepage

Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____

Quantity Received: 37.93 ton

Facility Signature: [Signature]

Date: 10/13/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE

(270) 676-1919

FAX

(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENTSource (Generator): Bowling Green WWTP Street Address: 1189 Preston AveCity: Bowling Green County: Warren State: KY 42102Contact Name: Heather Stringfield Phone No.: 270-782-4389Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: *Tom R...* Date: 10/15/15Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KYContact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch RoadContact Name: Kendra Littlepage Phone No: 270-676-1919Description of Waste: SludgeDate Received: _____ Quantity Received: 37.61 tonFacility Signature: *K. Littlepage* Date: 10/13/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

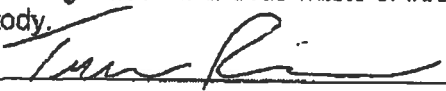
FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

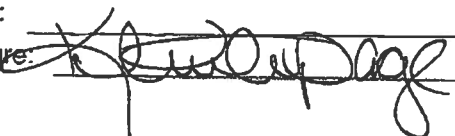
WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature:  Date: 10/14/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 30.21 ton
Facility Signature:  Date: 10/14/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP

Street Address: 1189 Preston Ave

City: Bowling Green

County: Warren

State: KY 42102

Contact Name: Heather Stringfield

Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____

Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: Tom Ri

Date: 10/14/15

Transporter (No. 1): Clay's Trucking

Street Address: Beechmont, KY

Contact Name: Rolande

Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: Bonnie Mitchell

Date: 10-14-15

Other Handlers (Transfer Facility): _____

Street Address: _____

Contact Name: _____

Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____

Quantity Shipped: _____

Facility Signature: _____

Date: _____

Transporter (No. 2): _____

Street Address: _____

Contact Name: _____

Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____

Date: _____

Disposal Facility: HCRL

380 Grays Branch Road

Contact Name: Kendra Littlepage

Street Address: White Plains Ky 42464

Description of Waste: Sludge

Phone No: 270-676-1919

Date Received: _____

Quantity Received: 36.53 ton

Facility Signature: Kendra Littlepage

Date: 10/14/15

HOPKINS COUNTY REGIONAL LANDFILL


380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

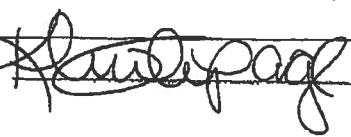
PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature:  Date: 10/14/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 33.30 ton
Facility Signature:  Date: 10/14/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP

Street Address: 1189 Preston Ave

City: Bowling Green

County: Warren

State: KY 42102

Contact Name: Heather Stringfield

Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____

Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: _____

Date: 10-15-15

Transporter (No. 1): Clay's Trucking

Street Address: Beechmont, KY

Contact Name: Rolande

Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____

Date: _____

Other Handlers (Transfer Facility): _____

Street Address: _____

Contact Name: _____

Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____

Quantity Shipped: _____

Facility Signature: _____

Date: _____

Transporter (No. 2): _____

Street Address: _____

Contact Name: _____

Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____

Date: _____

Disposal Facility: HCRL

380 Grays Branch Road

Contact Name: Kendra Littlepage

Street Address: White Plains Ky 42464

Description of Waste: Sludge

Phone No: 270-676-1919

Date Received: _____

Quantity Received: 37.80 ton

Facility Signature: _____

Date: 10/15/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature] Date: 10/20/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 32.34 ton
Facility Signature: [Signature] Date: 10/20/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: *Tom R* Date: 10/20/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: *Ronni Miller* Date: 10-20-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.48 ton
Facility Signature: *Kendra Littlepage* Date: 10/20/15

HOPKINS COUNTY REGIONAL LANDFILL


380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

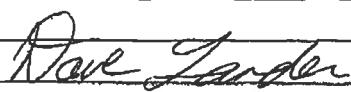
PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature:  Date: 10/20/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 33.35 ton
Facility Signature:  Date: 10-20-15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 10/21/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 33.72 ton
Facility Signature: [Signature] Date: 10/21/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: Tru Rci Date: 10/21/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: White Plains Ky 42464
Description of Waste: Sludge Phone No: 270-676-1919
Date Received: _____ Quantity Received: 30.71 ton
Facility Signature: Kendra Littlepage Date: 10/21/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: *Tom Ricci* Date: 10/21/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: *Barbara Mitchell* Date: 10-21-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge

Date Received: _____ Quantity Received: 36.89 tonFacility Signature: *Kendra Littlepage* Date: 10/21/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE

(270) 676-1919

FAX

(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 10-26-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 37.97 ton
Facility Signature: [Signature] Date: 10/26/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE

(270) 676-1919

FAX

(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENTSource (Generator): Bowling Green WWTP Street Address: 1189 Preston AveCity: Bowling Green County: Warren State: KY 42102Contact Name: Heather Stringfield Phone No.: 270-782-4389Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature] Date: 10-27-15Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KYContact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch RoadContact Name: Kendra Littlepage Phone No: 270-676-1919Description of Waste: SludgeDate Received: _____ Quantity Received: 35.70 tonFacility Signature: [Signature] Date: 10/27/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE

(270) 676-1919

FAX

(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENTSource (Generator): Bowling Green WWTP Street Address: 1189 Preston AveCity: Bowling Green County: Warren State: KY 42102Contact Name: Heather Stringfield Phone No.: 270-782-4389Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature] Date: 10-28-15Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KYContact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch RoadContact Name: Kendra Littlepage Phone No: 270-676-1919Description of Waste: SludgeDate Received: _____ Quantity Received: 35.39 tonFacility Signature: [Signature] Date: 10/28/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11-28-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 32.78 ton
Facility Signature: [Signature] Date: 10/28/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE

(270) 676-1919

FAX

(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 10-29-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 30.76 ton
Facility Signature: [Signature] Date: 10/29/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 10-29-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: 10

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.99 ton
Facility Signature: [Signature] Date: 10-29-15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11/4/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: White Plains Ky 42464
Description of Waste: Sludge Phone No: 270-676-1919
Date Received: _____ Quantity Received: 37.34 ton
Facility Signature: [Signature] Date: 11/4/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: *Heather Stringfield* Date: 11/4/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: *Rolande* Date: 11-4-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 37.360 ton
Facility Signature: *Kendra Littlepage* Date: 11/4/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1188 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11/4/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No.: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No.: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No.: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No.: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 37.78 ton
Facility Signature: [Signature] Date: 11/4/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11-5-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: White Plains Ky 42464
Description of Waste: Sludge Phone No: 270-676-1919
Date Received: _____ Quantity Received: 34.85 ton
Facility Signature: [Signature] Date: 11/5/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE

(270) 676-1919

FAX

(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: *Tim Ri* Date: 11/5/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: *Rolande* Date: 11-5-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 37.5 ton
Facility Signature: *Kendra Littlepage* Date: 11/5/15

am

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: *Tru R...* Date: 11/5/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 30.78 ton
Facility Signature: *Kendra Littlepage* Date: 11/5/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11/6/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: 11-6-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 27.84 ton
Facility Signature: [Signature] Date: 11/6/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE

(270) 676-1919

FAX

(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11/6/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: 11-6-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 37.29 ton
Facility Signature: [Signature] Date: 11/6/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11-9-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 30.61 ton
Facility Signature: [Signature] Date: 11/9/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11-10-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 35.24 ton
Facility Signature: [Signature] Date: 11/10/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11-10-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.73 ton
Facility Signature: [Signature] Date: 11/10/15

HOPKINS COUNTY REGIONAL LANDFILL


380 Grays Branch Rd. PO Box 201

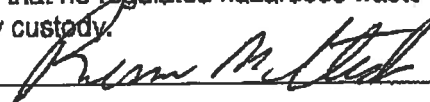
White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

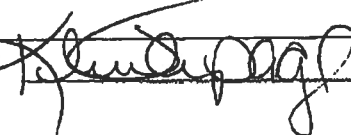
PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature:  Date: 11/11/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature:  Date: 11-11-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 33.51 ton
Facility Signature:  Date: 11/11/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: *Tom R.* Date: 11/11/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.63 ton
Facility Signature: *K. Littlepage* Date: 11/11/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: *Tom Ri* Date: 11/11/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.57 ton
Facility Signature: *Kendra Littlepage* Date: 11/11/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11-12-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 30.42 ton
Facility Signature: [Signature] Date: 11/12/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11-12-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: 11-12-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 35.77 ton
Facility Signature: [Signature] Date: 11/12/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11-12-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 36.11 ton
Facility Signature: [Signature] Date: 11/12/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: 11-13-15 Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: Chad Oliver Date: 11-13-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: 11-13-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 28.10 ton
Facility Signature: Kendra Littlepage Date: 11/13/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE

(270) 676-1919

FAX

(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11/17/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: 11-17-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 32.16 ton
Facility Signature: [Signature] Date: 11/17/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11/17/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.47 ton
Facility Signature: [Signature] Date: 11/17/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11/17/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 31.75 ton
Facility Signature: [Signature] Date: 11-17-15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11/18/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 3647 ton
Facility Signature: [Signature] Date: 11/18/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

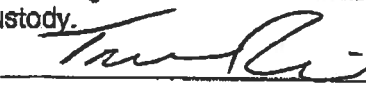
White Plains, KY 42464

PHONE
(270) 676-1919FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

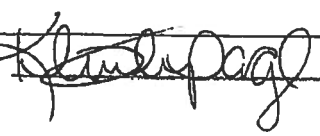
WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature:  Date: 11/18/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 35.21 ton
Facility Signature:  Date: 11/18/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201
White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11/19/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 36.11 ton
Facility Signature: [Signature] Date: 11/19/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11/19/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.57 ton
Facility Signature: [Signature] Date: 11/19/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11/20/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.77 ton
Facility Signature: [Signature] Date: 11/20/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11-23-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 30.21 ton
Facility Signature: [Signature] Date: 11/23/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11-23-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: White Plains Ky 42464
Description of Waste: Sludge Phone No: 270-676-1919
Date Received: _____ Quantity Received: ~~0.00~~ 30.52 ton
Facility Signature: [Signature] Date: 11/23/16

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11-24-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.87 ton
Facility Signature: [Signature] Date: 11/24/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11-24-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.91 ton
Facility Signature: [Signature] Date: 11-24-15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919


FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

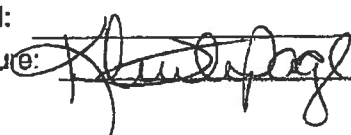
WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature:  Date: 11/24/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 37.61 ton
Facility Signature:  Date: 11/25/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11/25/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: White Plains Ky 42464
Description of Waste: Sludge Phone No: 270-676-1919
Date Received: _____ Quantity Received: 35.04 ton
Facility Signature: [Signature] Date: 11/25/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 11-27-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 35.16 ton
Facility Signature: [Signature] Date: 11-27-15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: *Heather Stringfield* Date: 11/30/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 32.80 ton
Facility Signature: *Kendra Littlepage* Date: 11/30/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201
White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: *Tru R* Date: 11/30/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 31.960 ton
Facility Signature: *Kendra Littlepage* Date: 11/30/15

HOPKINS COUNTY REGIONAL LANDFILL380 Grays Branch Rd. PO Box 201
White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12/1/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 33.47 ton
Facility Signature: [Signature] Date: 12/1/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12-1-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 30.33 ton
Facility Signature: [Signature] Date: 12/1/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12/1/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No.: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: 12-1-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 35.22 ton
Facility Signature: [Signature] Date: 12-1-15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12-2-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.52 ton
Facility Signature: [Signature] Date: 12/2/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12-2-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 33.44 ton
Facility Signature: [Signature] Date: 12/2/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12-3-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 33.09 ton
Facility Signature: [Signature] Date: 12/3/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12-3-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 36.82 ton
Facility Signature: [Signature] Date: 12/3/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12-4-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 32.16 ton
Facility Signature: [Signature] Date: 12/4/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12-8-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: 12-8-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 35.19 ton
Facility Signature: [Signature] Date: 12-8-15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12-8-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 30.57 ton
Facility Signature: [Signature] Date: 12/8/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENTSource (Generator): Bowling Green WWTP Street Address: 1189 Preston AveCity: Bowling Green County: Warren State: KY 42102Contact Name: Heather Stringfield Phone No.: 270-782-4389Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature:  Date: 12-8-15Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KYContact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch RoadContact Name: Kendra Littlepage Phone No: 270-676-1919Description of Waste: SludgeDate Received: _____ Quantity Received: 35.39 tonFacility Signature:  Date: 12/8/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12/9/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.108 ton
Facility Signature: [Signature] Date: 12/9/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919FAX
(270) 676-1920**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12/9/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: 12-9-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 38.22 ton
Facility Signature: [Signature] Date: 12/9/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12/9/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 35.14 ton
Facility Signature: [Signature] Date: 12/9/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE

(270) 676-1919

FAX

(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave

City: Bowling Green County: Warren State: KY 42102

Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature] Date: 10/10/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY

Contact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road

Contact Name: Kendra Littlepage Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____ Quantity Received: 32.82 ton

Facility Signature: [Signature] Date: 12/10/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP

Street Address: 1189 Preston Ave

City: Bowling Green

County: Warren

State: KY 42102

Contact Name: Heather Stringfield

Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: 12/10/15

Quantity Shipped: 34.860

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature]

Date: 12/10/15

Transporter (No. 1): Clay's Trucking

Street Address: Beechmont, KY

Contact Name: Rolande

Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: [Signature]

Date: 12/10/15

Other Handlers (Transfer Facility): [Signature]

Street Address: [Signature]

Contact Name: [Signature]

Phone No: [Signature]

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: [Signature]

Quantity Shipped: [Signature]

Facility Signature: [Signature]

Date: [Signature]

Transporter (No. 2): [Signature]

Street Address: [Signature]

Contact Name: [Signature]

Phone No: [Signature]

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: [Signature]

Date: [Signature]

Disposal Facility: HCRL

Street Address: 380 Grays Branch Road
White Plains Ky 42464

Contact Name: Kendra Littlepage

Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: 12/10/15

Quantity Received: 34.860 ton

Facility Signature: [Signature]

Date: 12/10/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12/16/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 33.98 ton
Facility Signature: [Signature] Date: 12/11/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENTSource (Generator): Bowling Green WWTP Street Address: 1189 Preston AveCity: Bowling Green County: Warren State: KY 42102Contact Name: Heather Stringfield Phone No.: 270-782-4389Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature:  Date: 12/15/15Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KYContact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature:  Date: 12-15-15

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch RoadContact Name: Kendra Littlepage Phone No: 270-676-1919Description of Waste: SludgeDate Received: _____ Quantity Received: 32.75 tonFacility Signature:  Date: 12/15/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave

City: Bowling Green County: Warren State: KY 42102

Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____ Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: [Signature] Date: 12/15/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY

Contact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____

Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____

Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road

Contact Name: Kendra Littlepage Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____ Quantity Received: 33.59 ton

Facility Signature: [Signature] Date: 12/15/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: X [Signature] Date: 12/17/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.75 ton
Facility Signature: Dave Landa Date: 12-17-15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: X Tru Ri Date: 12/18/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: 12-18-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 35.19 ton
Facility Signature: [Signature] Date: 12/18/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: X [Signature] Date: 12/18/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: 12-18-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 37.54 ton
Facility Signature: [Signature] Date: 12/18/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: X [Signature] Date: 12/21/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: 12-21-18

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 35.19 ton
Facility Signature: [Signature] Date: 12/21/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: X  Date: 12-21-15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

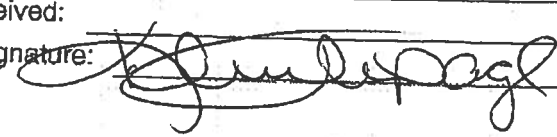
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1910

Description of Waste: Sludge
Date Received: _____ Quantity Received: 37.02 ton
Facility Signature:  Date: 12/21/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

Approval #HCL-12-023

Expires 5-22-2018

PHONE
(270) 676-1919

FAX
(270) 676-1920

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: [Signature] Date: 12/21/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.22 ton
Facility Signature: [Signature] Date: 12/21/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: X [Signature] Date: 12/22/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 32.05 ton
Facility Signature: [Signature] Date: 12/22/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: X [Signature] Date: 12/22/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: [Signature] Date: 12-22-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919

Description of Waste: Sludge
Date Received: _____ Quantity Received: 34.54 ton
Facility Signature: [Signature] Date: 12/22/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____

Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: X

Date: 12/22/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____

Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____

Quantity Shipped: _____

Facility Signature: _____

Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____

Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____

Quantity Received: 34.87 ton

Facility Signature: [Signature]

Date: 12/22/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: X [Signature] Date: 12/23/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: _____ Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 35.85 ton
Facility Signature: [Signature] Date: 12/23/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____

Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: X [Signature]

Date: 12/23/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: [Signature]

Date: 12-23-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____

Quantity Shipped: _____

Facility Signature: _____

Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____

Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge

Date Received: _____

Quantity Received: 35.810 ton

Facility Signature: [Signature]

Date: 12/23/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____

Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: X [Signature]

Date: 12/23/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: _____

Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____

Quantity Shipped: _____

Facility Signature: _____

Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____

Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge

Date Received: _____

Quantity Received: 30.22 ton

Facility Signature: [Signature]

Date: 12/23/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: X [Signature] Date: 12/27/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: 12-28-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 35.32 ton
Facility Signature: [Signature] Date: 12/28/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: X [Signature] Date: 12/27/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 35.96 ton
Facility Signature: [Signature] Date: 12/28/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP

Street Address: 1189 Preston Ave

City: Bowling Green

County: Warren

State: KY 42102

Contact Name: Heather Stringfield

Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____

Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: X [Signature]

Date: 12/27/15

Transporter (No. 1): Clay's Trucking

Street Address: Beechmont, KY

Contact Name: Rolande

Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: [Signature]

Date: 12-28-15

Other Handlers (Transfer Facility): _____

Street Address: _____

Contact Name: _____

Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____

Quantity Shipped: _____

Facility Signature: _____

Date: _____

Transporter (No. 2): _____

Street Address: _____

Contact Name: _____

Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____

Date: _____

Disposal Facility: HCRL

380 Grays Branch Road

Contact Name: Kendra Littlepage

Street Address: White Plains Ky 42464

Phone No: 270-676-1919

Description of Waste: Sludge

Date Received: _____

Quantity Received: 33.33 ton

Facility Signature: [Signature]

Date: 12/28/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE
(270) 676-1919

FAX
(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389

Description of Waste: Sludge

Date Shipped: _____

Quantity Shipped: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: X [Signature]

Date: 12/29/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: [Signature]

Date: _____

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: _____

Quantity Shipped: _____

Facility Signature: _____

Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: _____

Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge

Date Received: _____

Quantity Received: 35.17 ton

Facility Signature: [Signature]

Date: 12/29/15

HOPKINS COUNTY REGIONAL LANDFILL

380 Grays Branch Rd. PO Box 201

White Plains, KY 42464

PHONE

(270) 676-1919

FAX

(270) 676-1920

Approval #HCL-12-023

Expires 5-22-2018

WASTE SHIPMENT TRACKING DOCUMENT

Source (Generator): Bowling Green WWTP Street Address: 1189 Preston Ave
City: Bowling Green County: Warren State: KY 42102
Contact Name: Heather Stringfield Phone No.: 270-782-4389
Description of Waste: Sludge
Date Shipped: _____ Quantity Shipped: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Generator's Signature: X [Signature] Date: 12/29/15

Transporter (No. 1): Clay's Trucking Street Address: Beechmont, KY
Contact Name: Rolande Phone No: 270-476-8283
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Hauler's Signature: [Signature] Date: 12-29-15

Other Handlers (Transfer Facility): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Quantity Received: _____ Quantity Shipped: _____
Facility Signature: _____ Date: _____

Transporter (No. 2): _____ Street Address: _____
Contact Name: _____ Phone No: _____
Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.
Driver's Signature: _____ Date: _____

Disposal Facility: HCRL Street Address: 380 Grays Branch Road
Contact Name: Kendra Littlepage Phone No: 270-676-1919
Description of Waste: Sludge
Date Received: _____ Quantity Received: 30.04 ton
Facility Signature: [Signature] Date: 12/29/15